



Overview of Mental Health Budget and Policy Initiatives

2004 Through 2006

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Mental Health Policies Established in 2005 HB 1290/SB 5763

- Focus Services on Resilience and Recovery
- Utilize Evidence-based, Research-based, and Consensus-based practices
- Designate RSNs Through a Procurement Process
- Medicaid Eligibility for Incarcerated Persons
- Mental Health Task Force Continuation



Policy Direction

- Services will be Focused on Recovery and Resilience
- Consumer and advocate participation in services will be supported
- Competition between public and private entities is permitted
- Evidence-based, research-based, and consensus-based services will be utilized



RSN Contracting Process (Step 1)

- Eight RSNs Substantially Complied with RFQ
 - Cost-effective
 - Adequate residential and service capabilities
 - Collaboration with Criminal justice and CD services
 - Provide all services included in the MH state plan
 - Meet all Federal & State regulations and standards



RSN Contracting Process (Step 2)

- March 1, 2006 DSHS issued RFP to provide MH services in areas where Five RSNs didn't substantially meet the RFQ
- RSNs or other Entities may respond to the RFP
- There may be between 8 and 14 RSNs, and one Entity cannot control more than 3 RSNs



Restoration of Medicaid Eligibility

- Persons enrolled in Medical Assistance who are released from confinement will have their eligibility reinstated on the day of release
- DSHS will use medical or psychiatric exams done during confinement in making eligibility and enrollment determinations
- DSHS will coordinate with other entities to ensure prompt reinstatement and speedy eligibility determinations

Mental Health Task Force Continuation

- Task Force will Oversee:
 - MHD reorganization
 - Establishment of RSNs through Procurement
 - Funding Distribution Methodology
 - Serving Non-Medicaid Consumers
 - Inpatient Psychiatric hospital and community residential beds
- Task Force Expires June 30, 2007



SB 5763 Includes 6 Major Policy Areas

- Preliminary Steps Toward a Unified ITA
- Maximize Best Practices
- Interaction with Courts & Criminal Justice
- Fill Major Treatment Gaps
- Update and Clarify the Law
- Money



Preliminary Steps Toward a Unified ITA

- 2 Pilot Projects
 - PILOT 1: Combined Crisis Responder & Secure Detox Facility
 - PILOT 2: Chemical Dependency Intensive Case Management
- WSIPP Evaluation
 - Effectiveness
 - Cost effectiveness
 - Whether a unified ITA will be effective



Maximize Best Practices

- Adopt & Implement Comprehensive, Integrated Screening & Assessment Process
 - Mental health, chemical dependency, case-carrying social workers, DOC
- CD Assessments in DCFS Offices for Families Involved with Child Protective Services
- Tie Vendor Rate Increases To The Use Of Best Practices



Interaction with Courts & Criminal Justice

- Creates Civil Therapeutic Courts for Families in Dependency Proceedings
- Clarifies The Authority to Establish Mental Health & Pre-conviction Felony Drug Courts
- Local Jurisdictions May Combine Mental Health & Drug Courts
- JLARC Feasibility Study of Regional Jails for Persons Needing Treatment
- Reduce competency evaluation & restoration waiting times at the state hospitals



Fill Major Treatment Gaps

- Expands Chemical Dependency Treatment
 - Additional chemical dependency treatment for pregnant and parenting mothers and their babies
- New Type of Licensed Facility Called an 'Enhanced Services Facility'
 - For persons with mental disorders who don't need acute care but can't be served in existing settings
 - Both voluntary and involuntary clients



Update and Clarify the Law

- Consolidates Many Existing Client Rights Sections Into One Section
- Consolidates Confidentiality Provisions
- Provides Appropriate Cross-references to Chapter 70.02 RCW & to Other Confidentiality Sections



Money

- County Commissioners May Adopt 1/10 of 1% Local Option Sales Tax
 - New and Expanded Treatment and for Therapeutic Courts for Dependencies
- Funding in the Budget



Four Mental Health Issues Going Into the 2006 Session

- Pierce County Lawsuit
- Funding Distribution Formula for Medicaid and Non-Medicaid
- RSN Procurement Process
- Children's Mental Health



Pierce County Lawsuit SB 6793/HB3081

- Legal Liability Protection for DSHS
- State Hospital Bed Allocation
- Discharge From State Hospitals
- Short Term Commitments



Funding Distribution Formula for Medicaid and Non-Medicaid

- Study of Actuarial Rates for Medicaid Managed Care was Released after the 2005 Session
- After the 2005 Session, State Funds Appropriated to serve the Non-Medicaid Population Were Reallocated Among RSNs
- The Reallocation Caused Several Unanticipated Problems Across all 14 RSNs



RSN Procurement Process

- RFP provides a scoring factor for applicants including additional financial resources
- RFP provides additional opportunities to clarify submittal
- RSNs bidding on open areas will be evaluated in the new area only
- Private For-Profit entities are Excluded



Children's Mental Health

- \$450,000 provided to establish an evidence-based mental health program for children
- Established Through RFP and Operational 12/06
- Joint with Mental Health, Juvenile Justice and Child Welfare systems



Mental Health Budget Initiatives

- \$33 Million to Transform Community Mental Health Treatment
 - 5 Temporary Wards at Eastern and Western State Hospitals
 - Expand Community Services and Treatment
 - Expand Community Housing
 - Utilization Review Program
 - Review of the ITA statute and system
 - Study of Medicaid managed care rates



Mental Health Budget Initiatives

- \$22 Million to Increase Medicaid Managed Care Payments
- RSNs With Rates Above the Statewide Average Receive a 3.5% rate increase
- RSNs With Rates Below the Statewide Average Receive and Increase to the Statewide Average



Mental Health Budget Initiatives

- \$2 Million to Satisfy the Judgment in the Pierce County Lawsuit
- \$1.8 Million to Increase Staffing in the Criminal Offender Unit at Eastern State Hospital



Questions??